BEST AVAILABLE COPY

<u> </u>									Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 09874335														
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OR	OTHER SMALL I			
TOTAL CLAIMS			10				Γ	RATE	FEE	1	RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA		E	ASIC FEE	355.00	OR	BASIC FEE	· 710.00		
TOTAL CHARGEABLE CLAIMS			/ O minus 20=		· A			X\$ 9=		OR	X\$18=			
INDEPENDENT CLAIMS			minus 3 =		. 2			′X40=		ÖR	X80=	160		
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+135=		1	+270=	100		
* If the difference in column 1 is less than zero, enter "0" in column 2							L			OR		α¬ ()		
			TOTAL		OR	TOTAL OTHER	870							
		(Column 1)	MENDED - PART II (Column 2			(Column 3)	3) SMALL ENTITY			OR	SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	REMAINING NU AFTER PRE		HEST BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
NDM	Total	*	Minus	**	_	=		X\$ 9=		OR	X\$18=	:		
ME	Independent	*	Minus			=		X40=	:	OR	X80=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	·		
								TOTAL			TOTAL			
	(Column 1) (Column 2) (Column 3							DDIT. FEE		lo,,	ADDIT. FEE			
NDMENT B	CLAIMS		HIGH		EST		1 г		ADDI-	1		ADDI-		
		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE		
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=			
AMEN	Independent	<u> </u>	Minus	***		-	1 [X40=		OR	X80=	:		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=			
	TO ADDIT. F										TOTAL			
									·		ADDIT. FEE			
		(Column 1) CLAIMS	1		IEST	(Column 3)	1 -		4551	1		4504		
AMENDMENT C		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=			
	Independent	·	Minus	***		=	1 t	X40=		OR	X80=			
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							.405			1270-			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											+270= TOTAL			
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE										OR	ADDIT. FEE	L		
		nber Previously Pa					er foun	d in the app	propriate bo	x in co	lumn 1.			